File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, lowa 50319 Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

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2007 00-			* ***

2007 OCT 30 AM 10: 14

					111710.
COMMITTEE NAME	: (Must be same as on Statement of Orga	anization)			
Trotter -		,		FORM	***
IMPORTANT: Indicate	by # type of committee you are reporting for:			DR-2	DISCLOSURE
(1)Statewide/Legislativ	ve/Judge Standing for Retention Candidate (;	2)State PAC (3)State Party		Rev. 07/2007)	REPORT
(4)County Central Cor Subdivision Candidate	nmittee (5)County Candidate (6)City Candi (8)County PAC (9)City PAC (10)School I	date(7)School Board or Other Politica Board or Other Political Subdivision PAG	el E	or Office Use On	ly
11) Local Ballot Issue				omm. #	There are an appropriate agree of the same and the same agree of t
CANDIDATE COMM	IITTEES ONLY:				
Candidate Name	- He	Political Party (if applicable)	s	canned	
Lraig 1	MAC			computer	
Office Sough	01/10/1/10/	District (if Senate or House)	A	udited	
City Coun	cil - At-Large.				
l ata sanorte ara cubian	at to possible civil and criminal penalties. Pur	rought to lowe Code and the COD 20	A (7) d O(A 40440\ W	
Late reports are subject	1 /)	rsuant to towa Code sections 688.32	A(7) and 68	3A.401(3), the ca	ndidate, for a
I'	1 11/12	1.11 763 30 -			
Vary	pour	641-792-7556	-	10-27-	<u>~7</u>
SIGNATURE OF PER	SON FILING REPORT	TELEPHONE		DATE S	IGNED
	10. 22-02				
AM FILING A	10-53-07	REPORT FOR (1) ELECTION		ELECTION YEA	AR.
	(report date)	Indicate by	# 📗		
☐CHECK IF AMEND	MENT TO REPORT DATED		Local Com	mittees, enter Da	e of Election
				10th	
Check if this is fina (You must co	I (termination) report and attach Notice or ontinue to file reports until a DR-3 is filed.	f Dissolution Form DR-3.	County & L	ocal Committees,	enter County in
(100 111031 01	Milliae to the reports until a DIV-3 is filled.	.,	which Elec	tion is held	
ST	TATEMENT OF CASH ON HAND)			
CASH ON HAND at the	ne beginning of the reporting period. (Tol	tal of all funds held by the			
	This amount MUST be the same as the opporting period or must be zero if this is fir		¢	-()	- The State of the
		streport filed.)			
	MONEY TAKEN IN THIS PERIOD			\$	10
	Cash Contributions total (Attach Schedu	· ·			40
	Loans Received total (Attach Schedule			<u> </u>	>
Schedule H:	Total Sales of Campaign Property (Atta	ch Schedule H)			<u> </u>
<u>(Sc</u>	hedule H applies to Candidates' Comn	nittees Only)		#	. 10
		SUB-TOTAL	\$	7'37	48
SUBTRACT	TOTAL MONEY SPENT THIS PERIOD				17
Schedule B:	Expenditures total (Attach Schedule B)	(**also see debts and loans below)	•••••	297	73.61
	Loan Repayments total (Attach Schedul	·		-0	
		•		77	433
CASH ON HAND at th	ne end of this reporting period (if final repo	ort balance must be zero)	\$		
*UNPAID BILLS (Fro	m Schedule D - Attach Schedule D)		\$	- 0	2 -
IN KIND CONTRIBU	TIONS (From Schedule E - Attach Sched	lule E)	\$)
*OUTSTANDING LO	ANS (From Schedule F - Attach Schedule	e F)	\$		> -
	KDOWN (Schedule G Attached?)		• •	YES	NO
CANDIDATE COMMIT	,		*******	—·—·	· •
	N PROPERTY (From Schedule H - Attac	ch Schedule H)	œ	-0	
	with a friend or leading 11 - Wilds	on donedule (1)	\$	——————————————————————————————————————	

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For	Instru	ctions	See	Rack	of Forn	•
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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)	(Rev. 07/03)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) Trotter For Council		CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	VE COD
RECEIVED	(if applicable)	TO MILE YELD OF CONTINUOUS ON	TO CANDIDATE*	RECEIVED	√ IF FOR FUND-
(MM/DD/YR)	AND PAC CHECK NUMBER		(if applicable)		RAISER
	ID#				INCOME
	10#	Clayton C. Case		S CONTROL	
0 00 -	CK#	718 & 11th St S		\$ 1500	
9-27-07	CK# 1644	Newton, In SOUR			
	ID#	Carol Junes State Farm Ins.			
10-2-07	CK#	State Farm Ins.		2500	
10 21	CK#2929	312 IST AVEW Newton, It sous		43.	
	ID#	Mark Thayer			
10-4-67	014	1110 E 17th St.S		in	
10 4-01	CK# 498	Newton, IA 50,08		100 00	L
	ID#				
		Denvis chalupa		1	
10-3-67	CK#	4 Chancery Court		5000	
	3377 ID#	Newton, IA SOJOD			
	15#	Gary Kahn			
10-1-07	CK#8197	1104 S 5th Ave W	₩	50.00	
1021	<u> </u>	Newton, In SU08	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
	IU#	Trish Swanson		1. 18	
1610	CK#	1606 SI2th AVEE		40ª	
10-6-07		Newton, In 50208		,	·
	ID#	Tamm 1 De Jona		_	
	CK#	928 F 15+1 S+ 10		500	
10-4-67	1076	928 E 15+ 5+ N Newton, In 50208		ب	لـــــــا
	ID#	Richard Davidson			
,	0//#	1717 5 11th Ave E		de	
10-4-67	2/.27		:	100-00	
1-	CK# 3637	Newton, In 50208		, , ,	
		John Let Photography		.1.	
10-3-07	CK# 17/10	1615 & 11th AVE &		100 de	
10 /	1760	Newtony IA 50203		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
_		Denise Revell			
10-6-07	CK#	314 E 4th 54.5.	Sister	5000	
10 4	ск# 7539	Newton, In Solo8		30	
			SUB-TOTAL	1.5	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

TOTAL (if last page of this schedule)

SCHEDULE

MONETARY

Reset Form

For	Instructions,	See	Back	of Form

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CONTRIBUTIONS MONEY TAKEN IN (Including condidate's personal funds)	(Rev 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) Trother for Council.		CK THIS BOX IF NDING FORM

SCHEDULE

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME
10-6-07	CK# 278/	Robert Main 1621 5 12th Ave E Newton, IA 5208		92ch	
10-6-07	CK# 3362	Fred Dimon 621 E 5th st N Newton, IA 50208	uncle	10000	
10-6-07		Bruce Hoffmeler 1001 & HA AVE W Newon, IA 50208		100 or	
10-60	CK# 1024	Diane Richards 3506 Huy 5745 Newton, IA 50203		20°a	
10-40	CK# 4973	Sona Woody 508 N + In Ave 2 Newton, IA 50208		50 °	
10-6-07	CK#5767	Frank Liebl Dr 1121 Woodkind Dr Wenton, In 50208		100-or	
10-5-0		Linda Chape 920 E 3rd st S. Newton, Tra 58208		150.00	
10-6-07		Darry Soule 1617 5/12+0 AVC E Newton, In 5020)		30°	
10-6-07	ске 43()	1605 SIZTIMAVEE Newton, TA		75 OU	
	ск. 4146	George Dawson 1202 E 15th St. S. Newton, In 50208		שטן א	
			SUB-TOTAL	, 750	

TOTAL (If lest page of this schedule)

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For	Instruct	tions	See	Rack	of Form
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ONTRIBUTIONS .. MONEY TAKEN IN

CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	(Rev. 07/03)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)	***************************************	CK THIS BOX IF NDING FORM

SCHEDULE

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER
10-6-07	ID#	Tom Hayden 1715 N 10th Ave E. Newton, IA 52207		* 75 a	INCOME
10-6-17		Patrick Payton 513 E 6+15+1. SHE A. Des Moines, In		7500	
	CK# 10167	Fran Henderson 1101 5 13th Ave W Newton, IA 50207		2500	
10-5-07		Larry Trotter 1402 N 4th Ave E Newton, IA 50108	Father	1000	
10-4-07		Miscellaneous Cosh		20 a	
10-3-07	CK#	Unitemized cash		1900	X
10-9-07		Miscellaneous Cash Mary Micqueen		20	
10-6-07		Mary McQueen		2500	
	ск# 9731	Linda Campbell 725 w 9th St S. Newton Ita S0208		a500	
	ок# 72 <i>5</i> 3	Jim Girany Ave E 1326 N 5th Ave E Newton, In 50208	SUB-TOTAL	J.S	

TOTAL (If last page of this schedule)

Page 3 of 4 (for Schedule A)

^{*}Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

Reset Form

SCHEDULE	
A	MONETARY
(Rev. 07/03)	RECEIPTS

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

OMMITTEE NAME (Must be same as on Statement of Organization)
Smill IEE WANTE (Most be series as a series as
Trother for Council
MARKI TO COULCIT

CHECK THIS BOX	F
AMENDING FORM	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DAT RECEIV (MM/DD	VED	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10-1	(-07	CK# (OI)	Jill O'Connor, 50 George St. Grays Lake, 12 60030	Sister	* 50°W	
16-	(1-01	CK#51916	Sugan Metz 1006 s with Ave W Newton, IA 50208		25.ª	
10-1	1-17	CK#3062	Stan Clement 867 How F-36W Newton, IA 50208		Do. a	
16-1		ID#	Steve Mullan 1248 Szoth Ave. W Newton, In 5000		50.02	
		ок# Ск#4193	John Easley 1119 & 15th Ave W. Newton, In 50208		50°C	
18-	الحا		Miscellaneous Cash		20 ac	
10 -	(1-07	CK# -	Miscellaneas lash		200	
10-13	3-07	ID# CK#	Brad & Mary Manatt 1319 S. 12th Ade W Newton, In 50208		1000	
10-2	0-07	CK# 4886	Dayne & David Gross 2164 N 3rd AUC E New ton to 50200		2500	
		CK# / 863	Dale & Shavi Makl 2251 W 28th StN Newton, TA SONOS	SUB-TOTAL	5000	<u> </u>

TOTAL (if last page of this schedule)

Page 4 of 4 (for Schedule A)

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CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

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SCHEDULE

A MONETARY
(Rev 07/03) RECEIPTS

CHECK THIS BOX IF
AMENDING FORM

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COMMITTEE NAME	E(Must be same as on Statement of Organization)	
Troffer	tac / Dunc / 1.	

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	ID#	Marty & Rac ANN Hoffert 734 No 2nd Ave E		\$	INCOME
10-20	CK# 10 237	Newton, In		100.00	·
10-20	CK#	John Sandholm PO Box 487 Newton In 5000		100-	
<u> </u>	ID#				<u> </u>
10-20	CK# 2077	1022 € 18 hst. 5 Newton, In 50207		100.00	
10.20	CK# 6095	1550 Wizth St S.		50,00	
10-20	10#	Newton In 50208		50.	
10-20	CK#	Miscellaneous Cosh		16-00	
10-70	CK#CASK	Stre & Jill Struve 915 5 13 Ave W.			
10- 20	ID#	Newton, In 58208		25.00	
10-20	CK#4667	Jon Ewina 807 5 14th Are W.		25.00	
10-20	CK#	Don & Julie Fisher		A Community of the Comm	
0-20	6537	Newton, In 50208		Jin a	
16-20	CK#	MISC CASh Wolfs from Connection 6511 5 20h Ave W		100.00	
	ID#	Wolfs thone Connection	وبالمحدد وها والمساوية والمهامين ويدين ويتبالك يستمن ويودي والمارة		
16-25	CK#261	Newton In 50208		25	
			SUB-TOTAL	s 635	
		TOTAL (if last page	of this schedule)	\$	

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Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage).

If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 5 of 4 (for Schedule A)

For Instructions, See Back of Form CONTRIBUTIONS MONEY TAKEN IN (including candidate s personal funds) COMMITTEE NAME (Must be same as on Statement of Organization) Traffer for Council.

STATE CANDIDATES NOTE IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE) UST THE PACTIDENTIFICATION NUMBER AND THE PACTHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IDWA FTHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ JE FOR
(MM/DD/YR)	AND PAC CHECK		TO CANDIDATE*	RECEIVED	FUND. RAISER
	ID#	Roger & Cathy Gilbrearth			INCOME
1, -	CK#	409 E 17th 6t. N.		\$	
10-25	CK# 6909	Newton, IA SOJO8		500	
		Christ Tricia Johnson			
10-25	CK# 1013	Newton, TA 50208		50a	
	ID#	George & Christine Dawson			
	CK#	1202 E 15th St. S.			
10-25	CK#4149	Newton IA		25.00	L
		Water Smith			
10-25	CK# 2197	1118 5 5th Ave 10		10000	
<i></i>	10#	MATE Tammi Chance	100 mm to 100 mm	TOTAL TO STREET AND ADDRESS OF THE STREET	J
10 2=	CK#2===	1104 E 17th St. S.		50.00	
10-25	2575	Newton, In 50208	managan at a managan a managan ang managan ang ang ang ang ang ang ang ang	20	
10-25	CK#	misc Cash		10300	and the second s
	ID#	Craig Trotter	Sed Maney	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
10-01	CK#	Craig Triffer 1201 = 16th St 5. Newton, In 50208.	1.15011	1000	
0-01	10#	Newton, In So208	Seed Money My Self.	(00	
	CK#				
	CA#				
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	CK#				and chart
					L
			SUB-TOTAL -		

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Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03) E

MONETARY EXPENDITURES

CHECK THIS BOX IF AMENDING FORM

COMMITTE	E NAME (Must be s	same as on Statement of Organization)		
Trot	1 7 1	Council		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-15	ID# CK#Q9	Newton Daily News 200 1St AVE E Newton ITA SOOB	news paper ads	\$ 1000,00
10-28	ID# CK# /D1	Spartan fromotional Group towa 1714 N 44h Ave E Newton, In 50208	Yurd Signs	\$ 1000,00
10-28	CK# U	Rags frinting 1174st Ave E. J Newton, TA. 2008	Door Knockers	_
10-28	id# ск# ₁₀ 3	KCOB 95.9 FM ROBOX 66 Newton, IA 5008	Radio das	210."
	ID# CK#			
	ID# CK#			
·	ID# CK#			
	ID# CK#			
			SUB-TOTAL TOTAL (if last page of this schedule)	\$ 2973.67 \$ 2973.67

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page		_ of	
	7		